

ADMINISTRATION FOR
CHILDREN & FAMILIES New Social Media Account Proposal Form

ACF Dfc[fUa #CZ]W:

Proposed Account Name/URL:

Account Login Email Address:

| | | | |
|---------------|---------|-----------|-------|
| Account Type: | Twitter | Facebook | Other |
| | Tumblr | Pinterest | |
| | Blog | Google+ | |

| | | |
|--|-----|----|
| Is there an HHS Accepted Terms of Service Agreement? | Yes | No |
|--|-----|----|

| | | |
|--|-----|----|
| Will this account be used to solicit public comments or to administer polls, surveys, or questionnaires? | Yes | No |
|--|-----|----|

| | | | |
|------------------------|-----------|-------|------|
| Schedule for updating: | times per | day | week |
| | | month | |

| | | | |
|-----------------------------------|-----------|-------|------|
| Schedule for moderating comments: | times per | day | week |
| | | month | |

Primary Account Manager(s):

| | |
|------|-------|
| Name | Email |
|------|-------|

Title

| | |
|------|-------|
| Name | Email |
|------|-------|

Title

| | |
|------|-------|
| Name | Email |
|------|-------|

Title

ADMINISTRATION FOR
CHILDREN & FAMILIES New Social Media Account Proposal Form

Provide contact information for all other staff involved in operating this account"

Name _____ Email _____

Name _____ Email _____

Name _____ Email _____

Name _____ Email _____

Name _____ Email _____

Name _____ Email _____

Name _____ Email _____

Authorizing OPDIV Manager

Name _____ Signature _____

Title _____ Date _____

Submitted by

Name _____ Signature _____

Title _____ Date _____